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K. SALY EXAMINER APR 2 2 2014



ACCOUNT NO. : 12000000195 REFERENCE : AUTHORIZATION COST LIMIT ORDER DATE: April 18, 2014 ORDER TIME : 5:02 PM ORDER NO. : 100470-015 CUSTOMER NO: 7780055 FOREIGN FILINGS NAME: MELBOURNE SQUARE, LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Emily Gray -- EXT# 52925

COVER LETTER

	on of Corporations		
SUBJECT: N	felbourne Square, LLC		
	Name	of Limited Liability Company	
The enclosed ". Existence, and	Application by Foreign Limited Liabi check are submitted to register the ab	lity Company for Authorization ove referenced foreign limited l	to Transact Business in Florida," Certificate of liability company to transact business in Florida
Please return al	I correspondence concerning this mat	ter to the following:	
	Corporate Paralegal		****
		Name of Person	
	Simon Property Group, Inc.		
		Firm/Company	
	225 W. Washington Street		
		Address	
	Indianapolis, IN 46204		
		City/State and Zip Code	
	arykovich@simon.com		
	E-mail address:	to be used for future annual report	notification)
For further info	rmation concerning this matter, pleas	e call:	
Aubre	y Rykovich	o. (317) 2	263-7131
	Name of Contact Person	Area Code	263-7131 Daytime Telephone Number
	ING ADDRESS:	STREET ADDRESS: Division of Corporations	
	on of Corporations ration Section	Registration Section	
	Rox 6327 assee, FL 32314	Clifton Building 2661 Executive Center Circle Tailahassee, FL 32301	
Enclosed is a	check for the following amoun	nt:	
	5.00 Filing Fee \$130.00 Filing Certificate of	Fee & 🔲 \$155.00 Filing F	ee & \$160.00 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	Melbourne Square, LLC
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
•	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited bility Company," "L.L.C," or "LLC.")
2.	Indiana 3. 46-5341209
•	Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4.	
	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
_	c/o Corporate Paralegal 225 W. Washington Street, Indianapolis, IN 46204 (Street Address of Principal Office)
5.	c/o Corporate Paralegal
	225 W. Washington Street, Indianapolis, IN 46204
	(Street Address of Principal Office)
6	c/o Corporate Paralegal
٠.	7.5 D
	P.O. Box 7033, Indianapolis, IN 46207-7033
	(Mailing Address)
7.	The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
М	elbourne-JCP Associates, Ltd., a Florida limited partnership, its sole member
2	25 W. Washington Street
<u>lr</u>	dianapolis, IN 46204
ha ac	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official ving custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not ceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator ust be submitted)
	MELBOURNE-JCP ASSOCIATES, LTD., a Florida limited partnership By: SIMON PROPERTY GROUP, L.P., a Delaware limited partnership, a general partner By: SIMON PROPERTY GROUP, INC., a Delaware corporation, its general partner

By: James M. Barkley, Secretary and General Counsel

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name	e of the Limited Liability	y Company is:	7 72
Melbourne Sq	uare, LLC		PULL TO
If unavailabl	e, the alternate to be use	ed in the state of Florida is:	THERESEE A
2. The name	e and the Florida street a	ddress of the registered agent and office are:	EEFFLORIES L
	Corporation Service Co	ompany	
		(Name)	-
	1201 Hays Street		_
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		
	Tallahasee	FL 32301 City/State/Zip	-
		Спуванскир	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.

By: Corporation Service Company Stephanie Mulnes, Asst. V.P.
(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

I, Connie Lawson, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

MELBOURNE SQUARE, LLC

duly filed the requisite documents to commence business activities under the laws of State of Indiana on April 07, 2014, and was in existence or authorized to transact business in the State of Indiana on April 18, 2014.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Eighteenth Day of April, 2014.

Corrie Lawson

Connic Lawson, Secretary of State

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